

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA(1) Troy John Daniels Jackson LD-8312
(Name of Plaintiff) (Inmate Number)100 Pike Street, Huntingdon, PA 16654-1112
(Address)(2) _____
(Name of Plaintiff) (Inmate Number)

(Address)

(Each named party must be numbered,
and all names must be printed or typed)vs.
(1) Superintendent/Crisp Coordinator / Sgt / CO
DELBAIS / Human / Hernandez
CO CO LT CO LT CO
(2) Chapman / GFF / Schell / Derr / Williams / Willingham
CO CO CO CO CO CO
(3) Kabik / Koh / Brinser / Shorts / Herner / Hahn / Plaushey
CO CO CO CO CO CO CO
(Names of Defendants)(Each named party must be numbered,
and all names must be printed or typed)FILED
SCRANTON

OCT 17 2018

PER SP DEPUTY CLERK

(Case Number)

3-18-cv-2011

CIVIL COMPLAINT

TO BE FILED UNDER: 42 U.S.C. § 1983 - STATE OFFICIALS28 U.S.C. § 1331 - FEDERAL OFFICIALS

I. PREVIOUS LAWSUITS

A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

Eastern district case # (14-7019) 2014, File from a complaint
i went through in 2013 at (scj) cheap Hill

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

A. Is there a prisoner grievance procedure available at your present institution? Yes No

B. Have you fully exhausted your available administrative remedies regarding each of your present claims? Yes No

C. If your answer to "B" is Yes:

1. What steps did you take? Grievance's, request slips
2. What was the result? They were denied and my request slips never was answer nor return to me

D. If your answer to "B" is No, explain why not: _____

III. DEFENDANTS

(1) Name of first defendant: (SCT) MAHANAY officials

Employed as Correctional officers at (SCT) mahaney
Mailing address: 301 morea road Frankville, PA 17931

(2) Name of second defendant: All listed as defendants at (SCT) MAHANAY

Employed as _____ at _____
Mailing address: _____

(3) Name of third defendant: _____

Employed as _____ at _____
Mailing address: _____

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

IV. STATEMENT OF CLAIM

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. The defendants listed herein came in my cell and assaulted me on dates of 11-7-16, 11-23-16 in the DTC/RHU at (SCT) mahaney without recorded records until i wrote it up this jail try to cover it up not once but twice and

in between these to dates of assault i, by the harass with verbal

2. Sexual harassment and harassment by some of the Defendants herein. They went as Far as to try a fabricate misconduct reports #^s B-566882 which was written on 11-7-16 and #^t 566815 which was written on 11-28-16. They then switch my work up stating i said this in my initial grievance but i said that. They Black my eye. Bust the side of my Face open drawing blood. They told individuals in the D.I./R.H.U. That i was rape by my father and told everyone i rape a nine year old boy putting my life in danger from the inmates in that jail. to attack herein Grievances #^s 654888, 652747, ~~652748~~, 653671, 653664, with sworn statement 18, Page 5, § 4904 of witnesses. As Exhibits, A, B, C, D, E
- 3.

V. RELIEF

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. I want the courts to allow me compensatory damages to Plaintiff against Defendants. Award punitive damages to plaintiff against defendants. Award declaratory reliefs that plaintiff constitutional rights was violated by the defendants. Issue an order prohibiting defendants and officials at my residing jail from retaliating against me or any other person who offered assistance to plaintiff in connection with filing of this action "my witness". Award the costs of this action to plaintiff. Award reasonable attorneys fees to plaintiff and award such other and further reliefs as this court may deem appropriate. Award a settlement of 250,000
- 2.
3. to plaintiff

I declare under penalty of perjury that the foregoing is true and correct.

^{12th}
~~October~~
Signed this 10-12-18 day of October 2018

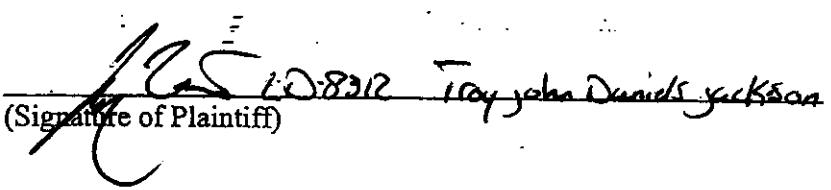

Troy John Daniels Jackson
(Signature of Plaintiff)

EXHIBIT A

EXTENSION
(SCI MAHANOY)
(301 MOREA ROAD, FRACKVILLE, PA 17932)

In accordance with the provisions of DC-ADM 804, Inmate Grievance System policy, this notification either responds to your recent communication expressing an interest in extending the established timeline for submitting the below noted grievance (or appeal), or provides notice that staff requires an extension for responding to your grievance.

Inmate Name:	Troy Daniels		Inmate Number:	LD-8312
Facility:	MAHANOY		Unit Location:	HD 16
Grievance #:	652797			652797
Action:				
		Inmate Request Denied – Your request for an extension of time to file a grievance or an appeal has been denied.		
		Inmate Request Approved – Your request for an extension of time to file a grievance or an appeal has been approved. You have been granted 10 additional working days to submit your grievance (or appeal).		
		Notice of Staff Extension – This serves as written notification that an extension is necessary in order to appropriately investigate and respond to your grievance (or appeal). Staff has been authorized to extend the response time by 10 additional working days.		
	X	Notice of Investigation – This serves as written notification that an extension is necessary in order to appropriately investigate and respond to your allegations of abuse. Staff has been authorized to extend the response time in accordance with DC ADM-001.		

Comments:

SECRET

Signature:	Jane Hinman
Title:	Facility Grievance Coordinator
Date:	11/18/16

cc: Superintendent
DC-15

DC-ADM 804, Inmate Grievance System Procedures Manual
Section 1 – Grievances & Initial Review

Issued: 12/1/2010
 Effective: 12/8/2010

Attachment 1-E

2007 4/27/2015
Qu DC-804
Part 1COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS

FOR OFFICIAL USE

GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR	FACILITY: <i>Nothanay</i>	DATE: <i>11-11-16</i>
FROM: (INMATE NAME & NUMBER) <i>Troy Daniels /D8312</i>	SIGNATURE OF INMATE: <i>TDS</i>	
WORK ASSIGNMENT: <i>G-L-R</i>	HOUSING ASSIGNMENT: <i>HD-16, Cell</i>	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any action you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages (one DC-804 form and one one-sided 8½" x 11" page). State all relief that you are seeking.

on 11-7-16 official marry Signs me for yard and shower in. I believe G. Valentine or GFF come over my int. room in my cell HD-16 in a Dist. Facility (SM) in State - me you like been! Dick you like working grievances you been't for shitter, yard and fire team. This my back back here. So I start tellin' Sod in mad at myself, a start havin' thoughts of killin' myself. I told the Sod my int. room is going to have my 3rd F (need a 3rd) be valentine. GFF Sod I don't care kill you if you'll ditch. So I close my door with my mattress in it, my sheet so I can't fit the vent a burn myself. By then the 3rd on like 10 yards was out side my door. So I believe is his flame opens my bucket in my door to push the mattress away from the door you will be able to see him on camera do this. So you they can see me tieing the fire sheet to the vent who finally get it tied to the vent, start fire on the nose. In fire around my neck when I got that down but it burned my neck in looked. Sod Harris in the eyes in said this is what you want like. Then jump off the toilet on hung for like two or three seconds before the sheet out. So I try, I run up on the toilet for the second time I am the sheet to the vent my cell door buzz open in sat 2 common side and GFF by name but their were made on camera enter in my cell. But Sod Harris took my hand on the floor while being yellin. the fire (the fire) I was so scared, I went to to kill myself now they where tryin to do it for me. So I put my hands under my chest in 1 block, sit tryin to get out from 11. But when came to my paper where

B. List actions taken and staff you have contacted, before submitting this grievance.

These are the same gards who is suppose to Perfect me

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date

WHITE Facility Grievance Coordinator Copy
GOLDEN ROD Inmate Copy

CANARY File Copy

PINK Action Return Copy

C.C.
 1205
 → Down over my but in my bootie was hurting site along with my back on legs and head in they were trying to pris my hands from under me, so i let my right hand go first then i let my left hand go when they put them in cuffs they started kicking and punching me again an ~~an~~ komarski started banging my head on the floor once again i start screaming for help but the Lt. directing the Sgt and officers start stating stop resisting with them letting them beat me. Then they statism they are the Mahaney gang stating i can't fuck with their possey. To remind me just hung myself why they look at me do it. But yet it look like i was in a fight my eye was swollen my fist were bleeding my arms where tape up my legs bruised in them i was throw in a P.O.C cell for four days in i was given two pieces of cheese and two pieces of bread for Breakfast Lunch and dinner from 11-16 11-18-18. But as they put me in POC cell 12 They cut off all my clothes in ~~in~~ recorded me with no clothe on my back side then towed me over to record my front side my penis I told them in writing you up They said it will be just one more trip to the security office they don't care they still get paid. I want to press charges (ASAP) in i want this investigated for Abuse Alligation

Beliefs ARE AS IS

- (1) I want the camera's looked at on ~~reserve~~ for a latter date for a
- (2) I want these employee's Fired
- (3) I want charges brought against these employee's
- (4) I want 50.00 dollar's for pain in suffering
- (5) I want free cable for a year

INITIAL REVIEW RESPONSE

SCI-Mahanoy
301 Morea Road
Frackville, PA 17932

This serves to acknowledge receipt of your grievance to the assigned Grievance Officer. The response is as follows

Inmate Name:	Daniels	Inmate Number:	LD8312
Facility:	Mahanoy	Unit Location:	HD2016
Grievance #:	652797	Grievance Date:	Nov. 18, 2016
Publication (if applicable):			
<input type="checkbox"/> Uphold Inmate <input checked="" type="checkbox"/> Grievance Denied <input type="checkbox"/> Uphold in part/Denied in part			

It is the decision of this grievance officer to uphold, deny or uphold in part/deny in part the inmate's initial grievance. This response will include a brief rationale, summarize the conclusion, any action taken to resolve the issue(s) raised in the grievance and, relief sought.

Response: Frivolous X
 In your grievance you stated that on Nov. 7 you attempted to kill yourself by hanging. You state that you had your door covered and when Sgt. Harris moved the mattress away you attempted to hang but the rope broke. You then began to retie the rope in another attempt to hang yourself. At that time Sgt. Harris, CO Valentine, and several other officers entered your cell hitting you with the shield knocking you down to the floor. The officers then began to kicking, punching you, and bang your head on the floor. You then put your arms under your body until they pried your hands out sand cuffed you. The officers continued their beating of you. You request that the officers be fired, charges be brought against them, \$50,000. for pain and suffering and free cable for a year.

I have investigated your allegations. As you stated you were trying to hang yourself and that you placed your arms under your body, not cooperating with staff as they were attempting to gain control of you to save your life. Sgt. Herron and involved staff deny punching or kicking you and also deny banging your head on floor. They do admit that they wrestled with you to free your arms from under you to secure your wrists and that no excessive force was used. Lt. Schell concurs these statements. Officer Valentine was not involved in this cell entry nor was near you or on the pod at any time.

I find staff actions were justified as their intent was for your safety and wellbeing. I find that you filed this grievance frivolously, therefore it is denied.

Signature:	Capt. D. Malick
Title:	Security Lieutenant
Date:	Feb. 24, 2017

cc: Superintendent
Facility Grievance Coordinator
DC-15
File

DC-ADM 804, Inmate Grievance System Procedures Manual
Section 1 – Grievances & Initial Review

Issued: 12/1/2010
Effective: 12/8/2010

Attachment 1-D

RECEIVED

MAR - 9 RECD

FACILITY MANAGEMENT
APPEAL

SCI MAHANOY
SUPERINTENDENT'S OFFICE

NAME Daniels Tracy NUMBER LD-8312 DATE 3-2-17

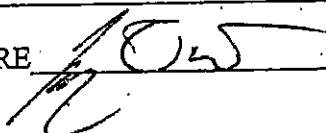
GRIEVANCE# 652797

I RECEIVED MY ACTION RETURN COPY ON: 2-27-17

I will like to elaborate on Capt. D. Malick initial response in which he fabricated my initial grievance to make it as if i said things such as; He stated that i said C.O. Valentine came in my cell in i said no such thing i stated he was the one on my interaction in my cell stating to me that this is his house back here in the BHC/DTC in i was burnt for every thing i stated Sgt. Harron, 2nd Lieutenant, and Lee in other come in my cell this Capt. D. Malick purposely fabricated my initial report to make it sound as something was said is not what i wrote. The i never said they pried my hands out. I said i held up why they were kicking in punching on me in black out to get away from the pain. Then he further ~~stated~~ lied stated that the officers were trying to gain control of me to save my life. First i was being my self why did they come in my cell with a shield if they are trying to prevent me from self harm. A shield is use for force do you not agree? And if i was not being punch in kick why was my eye swollen? Then the camera that came to my cell after 1st shift let them break an eye straw that was on top of the shield how did that happen? its because i was being beaten and kick all over that cell then this Capt. D. Malick state's that this is a frivolous grievance, this is that is in all these things happen. They can in my cell. Then he never elaborated on why was my close out officer and tip off of me in a POC cell then my back in pain's was ~~not~~ recorded by these guards in i was given the opportunity to stop my self its all on camera.

My Beliefs ARE The Same as in
my initial grievance.

INMATE SIGNATURE



Facility Manager's Appeal Response

(MAHANOY)

(301 MOREA ROAD, FRACKVILLE, PA 17932)

This serves to acknowledge receipt of your grievance appeal to the Facility Manager for the grievance noted below. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", the following response is being provided based on a review of the entire record of this grievance. The review included your initial grievance, the Grievance Officer's response, your appeal to me and any other documents submitted.

Inmate Name:	Troy Daniels	Inmate Number:	LD-8312
Facility:	Mahanoy	Unit Location:	HD 16
Grievance #:	652797		
Publication (if applicable):			
Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Dismiss/Dismiss Untimely		
<p><i>It is the decision of this Facility Manager to uphold the initial response, uphold the inmate or dismiss. This response will include a brief rationale, summarizing the conclusion, any action taken to resolve the issue(s) raised in the grievance and your appeal and relief sought.</i></p>			
Response:	<p><i>Frivolous</i></p> <p>I am in receipt of your grievance appeal in which you state "I would like to elaborate on Capt. D. Malick's initial response . . ." Let me remind you that appeals exist to examine procedure if you, the grievant, identify errors in the way your grievance was processed and responded to. It is not to have your complaints heard a second time or to rebut the response received because you didn't like it.</p> <p>I find Capt. Malick's response to your initial grievance to be thoroughly researched, explained well, and to be adequate.</p> <p>I uphold the Grievance Officer's response and deny your appeal as well as the several relief stipulations you cite in your initial grievance, to include the \$50,000 and free cable for a year.</p>		
Signature:	<i>T. Daniels</i>		
Title:	Facility Manager		
Date:	3/3/17		

cc: Facility Grievance Coordinator
 DC-15
 DSFM/DSCS
 Grievance Officer
 file

Did not receive until

3-6-17

INMATE APPEAL TO FINAL REVIEW GRIEVANCE				
INMATE NUMBER	NAME	FACILITY	DATE	GRIEVANCE #
1D-8312	Daniels Troy	MAHANOY	3-6-17	652797
I received my appeal from the Superintendent on <u>3-6-17</u> and have the following appeal issues.				
<p>Refer to DC-ADM 804, Grievance Appeal Procedures, for complete instructions. Appeals must relate to the issue presented in the initial grievance and 1st level appeal.</p> <p>Please provide a BRIEF (no longer than two pages) appeal statement.</p> <p>I will like to state that this grievance was not properly investigated by the (C) Security Captain in which he made Alligations in his initial response that i said things which was not in my initial grievance. He Fabricated my initial grievance in his response to go around the facts that these officials assaulted me by using extreme force on me in blacking my eye when i was the one hanging.</p> <p>My Belief ABE the same as in My initial Grievance.</p>				

INMATE SIGNATURE:

2017

Final Appeal Decision
Secretary's Office of Inmate Grievances & Appeals
Pennsylvania Department of Corrections
1920 Technology Parkway
Mechanicsburg, PA 17050

This serves to acknowledge receipt of your appeal to the Secretary's Office of Inmate Grievances and Appeals for the grievance noted below. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", the following response is being provided based on a review of the entire record of this grievance. The review included your initial grievance, the Grievance Officer's response, your appeal to the Facility Manager, the Facility Manager's response, the issues you raised to final review, and (when applicable) any revised institutional responses required as a result of a subsequent remand action by this office. As necessary, input from appropriate Central Office Bureaus (e.g., Health Care Services, Chief Counsel, Office of Special Investigations and Intelligence, etc) may have been solicited in making a determination in response to your issue as well.

Inmate Name:	Troy Daniels	Inmate Number:	LD-8312
SCI Filed at:	Mahanoy	Current SCI:	Rockview
Grievance #:	652797		
Publication (if applicable):			
Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Uphold In part/Deny in part		
<p>It is the decision of the Secretary's Office of Inmate Grievances and Appeals to uphold the initial response, uphold the inmate, or Uphold In part/Deny in part. This response will include a brief rationale, summarizing the conclusion, any action taken to resolve the issue(s) raised in the grievance and your appeal and relief sought.</p>			
Response:	<p>This office is in receipt of your appeal and has reviewed all applicable documents. In your grievance, you ultimately claim that on 11/7/16 when you were attempting to hang yourself, staff entered your cell, hit you with a shield, knocking you to the floor. You claim that they physically abused you by kicking and punching you. You seek staff disciplinary action, free cable for a period of time, and monetary relief.</p> <p>A review of the records reflects that your claims were investigated and that investigation was reviewed and approved by OSII. Your allegations of abuse were unsubstantiated. Your appeal and any requested relief is denied.</p>		
Signature:	Dorina Varner <i>Dorina Varner</i>		
Title:	Chief Grievance Officer		
Date:	3/21/17		

DLV/MEB

cc: DC-15/Superintendent DelBalso/Garman
Grievance Office

Declaration

I Ryan E Miller #MC0268 swear that the information scribe herein is the truth. On November 7th, 2016 I was standing at my cell door H-D-02 Mental Health unit and witnessed #0 Derr, #0 Chapman, #0 GEE, #0 Valentine, #0 Zendarski, Sgt. Herron, Lt Schell run in I/m Troy Daniels #LD-8312 cell while he was attempting Suicide and these C/O's started beating this inmate. While I/m Troy Daniels #LD-8312 was Handcuffed with "Both Hands Behind his Back" I witnessed #0 Zendarski repeatedly kick and punch I/m Troy Daniels #LD-8312 in the face. At all times I/m Troy Daniels #LD-8312 was in a non-defensive manner and was not fighting back. I heard I/m Troy Daniels #LD-8312 "Beg" the officers to please stop hitting him. I Ryan E Miller #MC0268 heard and witnessed #0 Zendarski shout out that he would not stop until he was done. I the witnesses #0 Zendarski repeatedly kick and punch I/m Troy Daniels #LD-8312 again.

I Ryan E Miller #MC0268 am willing to testify on this concern/matter if needed. I Ryan E Miller #MC0268 know under the penalties of Perjury (18.P.A.C.S. § 4904) under False testimony that I'm subjected to the laws of perjury.

Submitted Truthfully
Ryan E Miller #MC0268


Exhibit, B

EXTENSION
 (SCI MAHANOY)
 (301 MOREA ROAD, FRACKVILLE, PA 17932)

In accordance with the provisions of DC-ADM 804, Inmate Grievance System policy, this notification either responds to your recent communication expressing an interest in extending the established timeline for submitting the below noted grievance (or appeal), or provides notice that staff requires an extension for responding to your grievance.

Inmate Name:	Troy Daniels	Inmate Number:	LD-8312
Facility:	MAHANOY	Unit Location:	HD 20
Grievance #:	654888		654888

Action:

		Inmate Request Denied – Your request for an extension of time to file a grievance or an appeal has been denied.
		Inmate Request Approved – Your request for an extension of time to file a grievance or an appeal has been approved. You have been granted 10 additional working days to submit your grievance (or appeal).
		Notice of Staff Extension – This serves as written notification that an extension is necessary in order to appropriately investigate and respond to your grievance (or appeal). Staff has been authorized to extend the response time by 10 additional working days.
	X	Notice of Investigation – This serves as written notification that an extension is necessary in order to appropriately investigate and respond to your allegations of abuse. Staff has been authorized to extend the response time in accordance with DC ADM 001.

Comments:

Signature:	Jane Hinman
Title:	Facility Grievance Coordinator
Date:	12/13/16

cc: Superintendent
 DC-15

GRIEVANCE REJECTION

Facility

Facility address

This serves to acknowledge receipt of your grievance to this office. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System", I have reviewed all documents provided as part of the grievance. Upon consideration of the grievance, it is the decision of this office to reject your grievance due to a failure to comply with the provisions of the DC-ADM 804, as specified below.

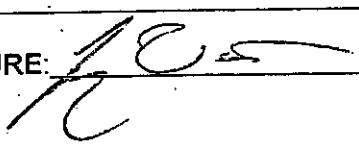
Inmate Name:	Troy Daniels	Inmate Number:	LD-8312
Facility:	Mahanoy	Unit Location:	HD-2020
Grievance #:	654888		

Decision:	Rejection
<i>Your grievance is being rejected for the reason(s) outlined below.</i>	
Rationale:	
1. Grievances related to the following issues shall be handled according to the procedures specified in the policies listed and shall not be reviewed by the Facility Grievance Coordinator.	
a) DC ADM 008 Prison Rape Elimination Act (PREA) – allegations of a sexual nature against a staff member and/or inmate-on-inmate sexual contact	
b) DC ADM 801 Inmate Discipline/Misconduct Procedures	
c) DC ADM 802 Administrative Custody Procedures	
2. The grievance was not submitted within fifteen (15) working days after the events upon which claims are based.	
3. Grievance involves matter(s) that occurred at another facility and should be directed by the inmate to the appropriate facility.	
4. The grievance was not signed and/or dated with correct commitment name, number, contained UCC references, or was not presented in proper format.	
5. Grievance must be legible, understandable, and presented in a courteous manner.	
6. The grievance exceeded the two page limit. Description needs to be brief.	
7. Grievance does not indicate that you were personally affected by a Department or facility action or policy.	
8. Grievances based upon different events must be presented separately.	
9. The issue(s) presented on the attached grievance has been reviewed or is currently being reviewed and addressed.	
10. Group grievances or grievances filed on behalf of another inmate are prohibited.	
11. Grievance disputes previous grievances, appeal decisions or staff members who rendered those decisions.	
X 12. You are currently on grievance restriction. You are limited to one grievance every 15 working days. Last grievance # 653796 was submitted on 11/28/2016.	
13. You have not provided this Office with required documentation for proper review such as a DC-153A, Personal Property Inventory Sheet, Confiscated Items Receipt, Commissary/Outside Purchase Form and/or documents outlined on the DC ADM 005 Notification of Deductions Memo and/or the Notification of Amended Deductions Memo.	
14. <i>The publication appeal did not include a copy of the Notice of Incoming Publication Denial Form. (Attachment 3-B of DC-ADM 803)</i>	

Response:	
Signature:	<i>Jane Hinner</i>
Title:	Facility Grievance Coordinator
Date:	12/5/16

cc: Facility Grievance Coordinator
DC-15
File

DC-ADM 804 - INMATE GRIEVANCE SYSTEM				
INMATE APPEAL TO FACILITY MANAGER				
GRIEVANCE				
Inmate Number	NAME	HOUSING UNIT	DATE	GRIEVANCE#
LD-8312	Dowell, Troy	HD-20, cell	12-5-16	654888
I received my initial response from the Grievance Office/Coordinator on _____ and have the following appeal issues:				
Refer to DC-ADM 804, Grievance Appeal Procedures, for complete instructions.				
Please provide a BRIEF (no longer than two pages) appeal statement.				
<p>This is a response and appeal to my original grievance in which it state i am on grievance restriction. It state my last grievance was submitted on 11-28-16. If you look at Grievance Restriction notice Report, it was place on grievance restriction on 11-29-16 one day after the date of 11-28-16 which indicates i can submit one grievance effected from the date of 11-29-16. so im resubmitting this grievance. See attach. Restriction notice.</p>				
<p>_____</p>				

INMATE SIGNATURE: 

Grievance Restriction Notice

SCI Mahanoy
301 Morea Road
Frackville, PA 17932

In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", an inmate who files 5 frivolous grievances within a 30-day period may be restricted to filing no more than one grievance each 15 working days. The 15 working days begins the first working day following the date the inmate was placed on restriction. An inmate may be placed on grievance restriction for a maximum of 90 days. An inmate may appeal a grievance restriction to the Facility Manager.

Inmate Name:	Troy Daniels			Inmate Number:	LD-8312
Grievance Numbers:	653192, 653191, 652697, 652692, 652686			Found Frivolous:	
Date Restriction Begins:	11/29/16	Date Restriction Ends:	2/28/17		
Comments:					
<p>Mr. Daniels, I am hereby placing you on Grievance Restriction. You are misusing the intended purpose of the Grievance System. You have filed five frivolous grievances within the last 30 days. According to DC-ADM 804, you can only file one grievance each 15 working day effective today.</p>					
Signature:	Jane Hinman				
Title:	Facility Grievance Coordinator				
Date:	11/29/16				

cc: Deputy Secretary
Superintendent
Secretary's Office of Inmate Grievances and Appeals
DC-15
File

Commonwealth of Pennsylvania
Department of Corrections



STATE CORRECTIONAL INSTITUTION
at MAHANOY, PENNSYLVANIA
(570) 773-2158, EXT. 8102
jhinman@pa.gov

From the Desk of:
JANE HINMAN
Corrections Superintendent's Assistant

12/13/16

Sept asked me to accept
your grievance #65488 for
processing/resubmitting. It
will now be accepted &
assigned a Grievance Officer.

Jane Hinman, CSA

✓DC-804
Part 1

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
1920 TECHNOLOGY PARKWAY
MECHANICSBURG, PA 17050

FOR OFFICIAL USE
1654888
GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR <u>MS Jane</u>	FACILITY: <u>MAHANBY</u>	DATE: <u>11-29-16</u>
FROM: (INMATE NAME & NUMBER) <u>TCY Daniels 6D-8312</u>	SIGNATURE OF INMATE: <u>JG</u>	
WORK ASSIGNMENT: <u>N/A</u>	HOUSING ASSIGNMENT: <u>HD-20</u>	

INSTRUCTIONS:

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any action you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages (one DC-804 form and one one-sided 8½" x 11" page). State all relief that you are seeking.

B. List actions taken and staff you have contacted before submitting this grievance.

These are the same gods whom is to perfect me

Your grievance has been received and will be processed in accordance with DC-ADM 804.

(Revert) ~~Recd~~

12/13/10 ~~12/13/10~~

Date _____

Signature of Facility Grievance Coordinator

WHITE Facility Grievance Coordinator Copy CANARY File Copy PINK Action Return Copy
GOLDEN ROD Inmate Copy

CC

Troy Daniels

R.D.
LD-832

2 of 4
2009
Tells it all in the photos that was taken the day of this event of my eye. The code of ethics further states that employees are expected to treat their peers and general public with respect and conduct themselves properly and professionally at all times in which they did not. and employee's are to report to there supervisor any information which comes to their attention that indicates a violation of the Law, Rules and Regulation in which they all was in it together. But they are suppose to maintain the provision of such directive but as you see it was never told and All employee's are to submit any necessary written reports in a timely manner and in accordance with existing regulations. Reports submitted by employee's shall be truthful and no employee shall knowingly enter or cause to be entered any inaccurate, False or improper information or data or misrepresented the facts in any D.O.C records or report. Read my misconduct in look the camera in talk to ms. Becht They with hold this information for their benefit of not geting in trouble I was beat his day these officials herein took part in trying to cover this up stating to me just leave it alone. They did not write the full report. Their hiding evidents. And all employee's including medical staff and counselor's are required to report inmates abuse, complaints or ~~and~~ incidents of inmates abuse to their immediate supervisor. These codes where not put forth and these violation of the provisions of these codes any one whom participated in latter violated the code of conduct in are subjected to immediat disciplinary action.

My Beliefs ARE AS IS | I want this investigated for Abuse cover up.

- 1) I want it put on file i fear Retaliation for writing this report.
- 2) I want these gards suspended for a month.
- 3) I want \$5000 for pain in suffering.
- 4) I want free cable for a year.
- 5) I want the q tablet for 150.00 with 50.00 in medica bills on it.
- 6) I want the camera's video from the time and date herein this report Reserved For a latter date as needed for court
- 7) I want these gards to seek a year training for failure to reflect on the representant of the D.o.c regulations and code of conduct

INITIAL REVIEW RESPONSE

SCI-Mahanoy

301 Morea Road

Frackville, PA 17932

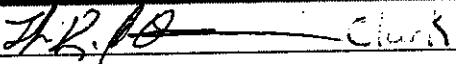
This serves to acknowledge receipt of your grievance to the assigned Grievance Officer. The response is as follows.

Inmate Name:	Daniels, Troy	Inmate Number:	LD-8312
Facility:	SCI-Mahanoy	Unit Location:	HD-20 cell
Grievance #:	654888	Grievance Date:	11/29/16
Publication (if applicable):			
<p> </p> <p> </p> <p> </p>			

Decision:	<input type="checkbox"/> Uphold Inmate <input checked="" type="checkbox"/> Grievance Denied <input type="checkbox"/> Uphold in part/Denied in part
-----------	--

It is the decision of this grievance officer to uphold, deny or uphold in part/deny in part the inmate's initial grievance. This response will include a brief rationale, summarize the conclusion, any action taken to resolve the issue(s) raised in the grievance and, relief sought.

Response:	Frivolous
<p>In your grievance you allege that on 11/23/16 you were abused by staff members when they entered your cell. You state that COI Kabilko slammed you all over the place. You further allege that they tore a ligament in your leg which you state you still did not get help for yet. Further in your grievance you state that officers held you down and this allowed COI Kabilko to punch and knee you. You allege that you were called "a nigger" and that the officers assigned to protect you let this happen. You allege that the officials of this institution are covering these allegations up. You seek relief for these allegations of 1. You want this put on file due to you have fear of retaliation, 2. You want the guards suspended for a month, 3. \$500,000 for pain and suffering, 4. Free cable for a year, 5. A 9" tablet for 150.00 and 50.00 in media links, 6. Video preserved for a later court date and 7. For the officers involved a year of training on rules and regulations. An investigation was conducted into your allegations of abuse and a number was submitted to OSII for tracking and a review of EOR#2016-MAH-00277 was conducted. During the course of this investigation you were interviewed about these allegations and stated to me that that Kabilko punched and kicked you and that COI Harner kicked you in the leg and punched you in the ribs. You don't make any mention of other officers assaulting you. You had to be escorted to the triage room due to you being placed on the ground to be restrained; while you were being triaged you never mentioned to the nurse or the OIC that you had an injury to your leg the only injury you had was an abrasion to the side of your head that had minimal bleeding. Also while in the triage room you do make an allegation that "Kabilko you drew blood you drew blood" during the review of video you are heard stating "Kabilko I'm going to fuck you up." You provided witness to these allegations but your witnesses only heard you state that you were abused but did not witness any abuse as you alleged them to have seen.</p> <p>I find no evidence to support your claims therefore this grievance is denied. As to the relief you seek all is denied except the following: 1. An investigation was conducted and a report was put on file., 2. Video footage was preserved as you requested.</p>	

Signature:	
Title:	Security Lieutenant
Date:	12/19/16

cc: Superintendent, Facility Grievance Coordinator, File

SCI
INMATE APPEAL TO FACILITY MANAGER
GRIEVANCE

SUPERINTENDENT'S OFFICE

Inmate Number	NAME	HOUSING UNIT	DATE	GRIEVANCE#
LD-8312	Daniels Troy	HD-5-Kell	12-25-16	654888

I received my initial response from the Grievance Office/Coordinator on 12-14-16 and have the following appeal issues:

Refer to DC-ADM 804, Grievance Appeal Procedures, for complete instructions.

Please provide a BRIEF (no longer than two pages) appeal statement.

First i will like to state the camera that was recording me in triage form will show that i told the nurse that my leg was bent up i could not sit up at first they had to lay me back down because my leg was in extreme pain. This severity it is living. And my witnesses did see what had taken place in HD-16 cell at that time and that is indicated in my initial grievance. They told me when they were taken down to security for questioning in they told me what they had said, which was what they said. That the guard was slaming me all over my cell and that Kabilka was punching me. I never told this security it that someone kicked me in my leg, i told that all the official in my initial grievance kick me down in also mr Kabilka to punch me all in my face, in which my eye showed the result on the pictures that was taken by the nurse that night. But then this hole thing was covered up. it look like nothing happen. look at my misconduct, B-50015 it states that the only thing happen that day was i covered my windows in was not responding in i was wake up for refusing to obey an order. Then is states on this misconduct that it happen at 4:32 PM which is a lie. if you look at the camera time and date indicated in my initial grievance you will see what really took place that date. this investigation was not done properly, my beliefs are as is (1) I went down for pain or suffering (2) I went the camera's time's and date indicated in my initial grievance. I kicked at and ~~beat~~ resourced for a letter date as needed for court (3) I went those guards suspended for a week for failure to reflect on the references of the Disc code conduct and policy's

INMATE SIGNATURE: 

↓

on t

B&C

Case 3:18-cv-02411-RDM-CA Document 1 Filed 10/17/18 Page 23 of 43

I want to say that I want the one whom did my investigation suspended from holding a gun as required for court. (S) I want the one whom did my investigation suspended from holding a gun. And to further state in Hudson guidelines to determine the constitutional of force used by corrections officers. In Jones v. Huff, corrections officers failed to stop other officers from unnecessarily beating a prisoner. The beating badly bruised and injured the prisoner, including a ~~black~~ black eye to the left side of his head. In which this is the result of my allegations. Then these same officials try to cover the whole thing up. It seem as if nothing happen. Again this is totally against policy in my due process was violated under the Eight Amendment claim. I am inentitle to the Beliefs in asking for within this Report/grievance Appeal. I was beaten by this guard, Mr. Kubliko in the other officials involved herein just let him do it without telling him to stop nor trying to stop him. And as my last Belief; I want my witnesses question again to seek truth within this report of Abuse. witnesses AFE As is; Russell Gray-MP-8461, Salley Robert MP-3574, Jayvin Taylor-MH-4490 and Jamil Porch GT-8483. See case: Thomas v. Stalter, 20 F.3d 748, 301-027 (1994) finding that excessive force was used when an officer punched a prisoner with his fist while the prisoner was being held down by at least nine other officers. And see case: Jones v. Huff, 789 F. Supp. 571, 535-36 (N.D.N.Y. 1997) where a prisoner was already being restrained by a number of guards as an officer start punching on the prisoner.

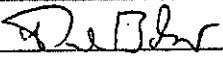
Facility Manager's Appeal Response

(MAHANOY)

(301 MOREA ROAD, FRACKVILLE, PA 17932)

14

This serves to acknowledge receipt of your grievance appeal to the Facility Manager for the grievance noted below. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", the following response is being provided based on a review of the entire record of this grievance. The review included your initial grievance, the Grievance Officer's response, your appeal to me and any other documents submitted.

Inmate Name:	Troy Daniels	Inmate Number:	LD-8312
Facility:	Mahanoy	Unit Location:	HD 5
Grievance #:	654888	HHA	
Publication (if applicable)			
Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold in part/Deny in part <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Dismiss/Dismiss Untimely		
<p><i>It is the decision of this Facility Manager to uphold the initial response, uphold the inmate or dismiss. This response will include a brief rationale, summarizing the conclusion, any action taken to resolve the issue(s) raised in the grievance and your appeal and relief sought.</i></p>			
Response:	<p><i>This is my response to your grievance appeal regarding grievance #624380.</i></p> <p><i>not mine belongs to another inmate as the grievance coord stated in her response.</i></p> <p>Your appeal raises numerous different issues than you presented in initial grievance; you go on to rebut Lt. Clark's investigation and add information that you state you did not tell him (when you should have):</p> <p>I find the Lt. Clark did an exceptional investigation into your allegations and the evidence proves your allegations false. Regarding the additional information and embellishments added in your appeal, I will not provide a response to these new accusations that were not raised in your initial grievance.</p> <p>Your appeal is denied. I also deny all the relief you are seeking except for what was already permitted by Lt. Clark in his response to your grievance.</p>		
Signature:			
Title:	Facility Manager		
Date:	1/5/17		

cc: Facility Grievance Coordinator
 DC-15
 DSFM/DSCS
 Grievance Officer
 file

God Bless

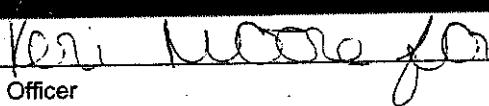
Form DC-135A INMATE'S REQUEST TO STAFF MEMBER		Commonwealth of Pennsylvania Department of Corrections
INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.		
1. To: (Name and Title of Officer) <u>Mrs Jane Hinman</u>	2. Date: <u>2-13-17</u>	
3. By: (Print Inmate Name and Number) <u>Ira Daniels ID-8312</u> <u>Ira Daniels</u> Inmate Signature	4. Counselor's Name <u>Mr Caroelis Key</u>	5. Unit Manager's Name <u>Mr Holl</u>
6. Work Assignment <u>N/A</u>	7. Housing Assignment <u>HD-16</u>	
8. Subject: State your request completely but briefly. Give details. <u>Hello Mrs Hinman, I'm writing in Reference to a grievance Mrs Theresa A. Belhalso has answer or replied to # 624380. I have yet to receive the pink action return copy of that grievance. So i ask please send me a copy of the grievance i am to have wrote please. God Bless. And thanks for your time and attention herein</u>		
 <u>(PS)</u> <u>I hope to hear from you (ASAP) Please</u> <u>With a response herein</u>		
9. Response: (This Section for Staff Response Only) <u>Mr. Daniels, this grievance # belongs to another inmate?</u>		
To DC-14 CAR only <input type="checkbox"/>		To DC-14 CAR and DC-15 IRS <input type="checkbox"/>

Staff Member Name Jane Hinman, Jane Hinman Date 2/17/17
 Print Jane Hinman Sign CSA

2017

Final Appeal Decision
Secretary's Office of Inmate Grievances & Appeals
 Pennsylvania Department of Corrections
 1920 Technology Parkway
 Mechanicsburg, PA 17050

This serves to acknowledge receipt of your appeal to the Secretary's Office of Inmate Grievances and Appeals for the grievance noted below. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", the following response is being provided based on a review of the entire record of this grievance. The review included your initial grievance, the Grievance Officer's response, your appeal to the Facility Manager, the Facility Manager's response, the issues you raised to final review, and (when applicable) any revised institutional responses required as a result of a subsequent remand action by this office. As necessary, input from appropriate Central Office Bureaus (e.g., Health Care Services, Chief Counsel, Office of Special Investigations and Intelligence, etc) may have been solicited in making a determination in response to your issue as well.

Inmate Name:	Troy Daniels			Inmate Number:	LD-8312	
SCI Filed at:	Mahanoy			Current SCI:	Mahanoy	
Grievance #:	654888					
<i>Publication (if applicable):</i>						
Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Uphold in part/Deny in part					
<i>It is the decision of the Secretary's Office of Inmate Grievances and Appeals to uphold the initial response, uphold the inmate, or Uphold in part/Deny in part. This response will include a brief rationale, summarizing the conclusion, any action taken to resolve the issue(s) raised in the grievance and your appeal and relief sought.</i>						
Response:	<input type="checkbox"/> Frivolous This office is in receipt of your appeal and has reviewed all applicable documents. In your grievance, you ultimately alleged that you were abused by staff on 11/23/16. It is noted that you take issue with the Superintendent's response containing a grievance number unrelated to this instant grievance. You seek staff disciplinary action, additional staff training, free cable, and monetary relief. A review of the records reflects that the initial reviewing officer investigated your claims and provided an appropriate response. The investigation was reviewed and approved by OSII and your claims were unsubstantiated. Your appeal and any requested relief is denied. The Superintendent's response contains a mere <u>typographical error</u> regarding the grievance number. The response itself is adequate.					
Signature:	Dorina Varner 					
Title:	Chief Grievance Officer					
Date:	1/31/17					

DLV/MEB

cc: DC-15/Superintendent DelBalso
Grievance Office

#1) How is the Superintendent response adequate if the grievance # she responded to belong to another inmate of (sic) mahany # 624380 Then said i raise numerous different issues than my initial grievance. I would guest so if i was referring to someone else grievance then my own.

Declaration

I Ryan E Miller #MCO268 swear that the information scribbled herein is the truth. On November 23rd, 2016 I was standing at my cell door H-D-C2 mental Health unit and witnessed #0 Briner, #habilto, #hahn, #willingham, #0 horner, #0 swartz, Lt Williams run in I/m Troy Daniels # LD-8312 cell after he was attempting suicide and these do's started slaming I/m Troy Daniels # LD-8312 all over the cell and beating him. While I/m Troy Daniels # LD-8312 was Handcuffed with his "Both hands Behind his Back" I witnessed #0 habilto punch and knee I/m Troy Daniels # LD-8312 in the face. This officer repeatedly punched and kneeled this inmate. I believe this officer was seeking vengeance on I/m Troy Daniels # LD-8312 for writing a "Grievance" on him. I/m Troy Daniels # LD-8312 face was swollen and his eye all bloody. While coming out the Cell the do's dropped I/m Daniels # LD-8312 on the floor while he was handcuffed.

I Ryan E Miller # MCO268 am willing to testify on this concern/matter if needed. I Ryan E Miller # MCO268 know under the penalties of Perjury (18.P.A.C.S. § 4904) under False testimony that I'm subjected to the laws of Perjury.

Submitted Truthfully
Ryan E Miller # MCO268
Ryan E Miller # MCO268

cc:file

Form DC-135A		Commonwealth of Pennsylvania Department of Corrections
INMATE'S REQUEST TO STAFF MEMBER		
20		
Facility Grievance Coordinator 1. To: (Name and Title of Officer) <u>Mrs Jane Hinman</u>		INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.
3. By: (Print Inmate Name and Number) <u>Gray Daniels WD-8312</u> <u>J. Daniels</u> Inmate Signature		2. Date: <u>12-15-16</u>
6. Work Assignment <u>n/a</u>		4. Counselor's Name <u>Mr Cwadzinski</u>
8. Subject: State your request completely but briefly. Give details. Good day mrs Hinman; I'm writing like you ask me to do. Well in references to the grievance restriction you place me on. Well as you can see in grievance #s 652797 and 654888, I have this whole BHD under investigation for these officials coming in my cell two time's on 6 to 7 shift and 7 to 8 shift without a camera in beating the crap out of me within two weeks. Then they try to cover it up as if nothing happens so I start writing every thing up like the psych ms hechtal told me to do. I put down my witness. I put the time and dates of every incident to show on camera that I'm telling the truth. It K. will whom handle all my grievances #s 653192, 653191, 652649, 652647, 652646 told me to my face in front of inmate Russell Gray MP-P461 in nineteen cell that he was going to make all of my grievances look as if they were frivolous so I can't place an grievance restriction. In which he did as you can see with his responses from my grievances. If you look some how he responded to all five of my grievances in 24 hours but yet said he investigated all five of my grievances. If you look at his responses and my grievances matter they are different different he talk about things that I never said in my grievances to make them seem frivolous. I even have witness in which was never question. He made all my grievance seem frivolous so I can't write these official up in the BHD. I appeal all of the grievances he deem frivolous. I yes I did ask why I was on grievance cell restriction but that was not the base of all my reports. and I never receive the misconduct indicator I was on cell restriction until 11-18-16. Please Assist in		
9. Response (if this Section for Staff Response Only) My Daniels, I do believe you were misusing the grievance system with all the grievances you filed. I also know you appealed my restriction to that lady & she upheld my decision. You are on restriction until 2/28/17. I am not going to review/discuss with you your grievance issues. That's what the appeal process is for.		
<input type="checkbox"/> To DC-14 CAR only		<input type="checkbox"/> To DC-14 CAR and DC-15 IRS

Staff Member Name Jane Hinman / Jane Hinman Date 12/19/16
 Print Sign CSA

Exhibit, 2

47 C.C.
Part 1
of Part 1
DC-804

**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS**

FOR OFFICIAL USE

653-004
GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR Mrs. Jane Hinman	FACILITY: MAHANOV	DATE: 11-18-11
FROM: (INMATE NAME & NUMBER) Troy Daniel S. LD:8312	SIGNATURE OF INMATE: 	
WORK ASSIGNMENT: n/a	HOUSING ASSIGNMENT:  HD-16- 	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any action you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages (one DC-804 form and one one-sided 8½" x 11" page). State all relief that you are seeking.

B. List actions taken and staff you have contacted, before submitting this grievance.

These are the cards I am to tell about this matter.

Page 5
of Page
1
on the
book

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date

WHITE Facility Grievance Coordinator Copy
GOLDEN ROD Inmate Copy

CANARY File Copy

PINK Action Return Copy

C.C.

2/1
Page 4

of such directive. This was such unprofessionalism which it also states in the code of Ethics that they are to remain profession at all time unaccepted conduct ~~and~~ or insolence will not be tolerated. And if any employee violates the provisions of such code's will be subjected to immediate disciplinary action by the appointed authority. The Psychomis Bachtel and Lutwak known what these officials were saying about me as the inmates on the (DTU) told them in they said they will notify their supervisor.

My Beliefs ARE AS IS

- 1) I want it put on file that ~~i~~ fear Retaliation as Retaliatory conduct for writing this report on those official's herein.
- 2) I want this matter under investigation on every one question herein this report to seek truth.
- 3) I want \$500.00 for pain in suffering. But will take \$500.00 in free cable for a year.
- 4) I want these official's herein to seek training for three months str.
- 5) I want these officials ~~to~~ herein disciplined by the appointing authority for failure to reflect on the references of the D.O.C.C of conduct and regulations.

Time and date written

IE my Beliefs ARE met their will Time: 5:40 P
be no further Action's from me Date: 11-18-16
on this matter at hand.

(PS)

Hope to hear from
you soon with
a response herein

Respectfully truly yours

345 LD8312

Tray John Daniels Jack

INITIAL REVIEW RESPONSE

SCI Mahanoy

301 Mores Rd

Frackville, PA 17932

This serves to acknowledge receipt of your grievance to the assigned Grievance Officer. The response is as follows

Inmate Name:	Daniels, Troy	Inmate Number:	LD8312
Facility:	SCI MAH	Unit Location:	H/D 2016
Grievance #:	653664	Grievance Date:	11-18-2016
Publication (if applicable):			
<input type="checkbox"/> Uphold Inmate <input checked="" type="checkbox"/> Grievance Denied <input type="checkbox"/> Uphold in part/Denied in part			

It is the decision of this grievance officer to uphold, deny or uphold in part/deny in part the inmate's initial grievance. This response will include a brief rationale, summarize the conclusion, any action taken to resolve the issue(s) raised in the grievance and, relief sought.

Decision:	<input type="checkbox"/> Uphold Inmate <input checked="" type="checkbox"/> Grievance Denied <input type="checkbox"/> Uphold in part/Denied in part	Frivolous:	<input checked="" type="checkbox"/>
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Response:

I have reviewed your grievance dated 11-11-2016, wherein you indicate that Sergeant Greenzweig, Officers Valentine, Mason, Derr, and Flannery came onto the DTU. You claim that Officer Valentine stated to everyone on the DTU that your father raped you and he is at SCI-Albion, and you are here due to raping a nine year old boy. You state that this is a Code of Ethics violation and that PSS Bechtel and myself are aware of what the officers are saying. You are requesting 1.) That the retaliation is put on file 2.) You want this investigated 3.) \$500,000 for pain and suffering but will take \$500.00 in free cable 4.) You want the officials to seek training for three months straight and 5.) You want the officials disciplined by the appointing authority for failure to reflect the references of the DOC Code of Conduct and regulations.

Based on my investigation, I find no evidence to support your claim of any staff making any such comments on the DTU concerning your situation. The video was reviewed and I've spoken to the officers you claim are involved and to inmate Gray, all interviewed deny any such claims. You have spoken to me about this previously about these claims and I have not found any evidence of any statements from staff. Staff assigned to the DTU have attended CIT class and are well trained.

Based on the above information, I consider this grievance to be frivolous because it lacks any basis of fact, you provide no evidence to support your claims, even your witnesses deny your claims. It is without merit with no further action necessary. The relief and compensation you seek is denied.

jh

Signature:	LT. K. Wall
Title:	COIII
Date:	12-21-2016

cc: Superintendent
Facility Grievance Coordinator
DC-15
File

my witness was never
question at all sir

~~DC-ADM 804~~
INMATE APPEAL TO FACILITY MANAGER DEC 9 & REC'D
GRIEVANCE

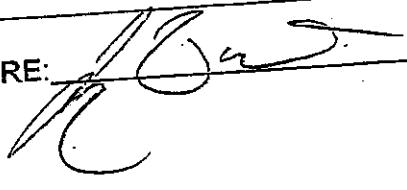
Inmate Number LD8312	NAME Daniels Troy	HOUSING UNIT HD-5-cell	DATE SUPERINTENDENT 12-25-16	GRIEVANCE# C53664
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Received my initial response from the Grievance Office Coordinator on 12-21-16

Refer to DC-ADM 804, Grievance Appeal Procedures, for complete instructions.

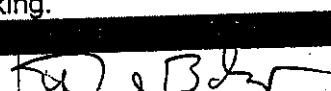
Please provide a BRIEF (no longer than two pages) appeal statement.

Now per ~~(1)~~ DC code of Ethics it states no department employee will enter my inaccurate, knowingly, false data or misrepresent the facts in my department records or report. Now on the date i receive my initial review response on 12-21-16 i notice Lt K. wall stated that he question my witness to be mr gray MPR461 was suppose to have told him it was a lie. So I immediately ask mr Gray MPR461 why ~~was~~ he lie like that in say these Allegations never happen. you were right there. Mr Gray Said to me he was never question by a mr Lt K. wall or any one else this Lt K. wall is lying in all of his initial review responses. to try in make it seems as if im lying. He's lying in his responses. I want my witness question to seek truth within this report. And this Lt K. wall i do not want responding to any of my grievances. He's taking up for all of these goods. And misbehaved did not tell Lt K. wall of this matter with these goods saying i was rape by my Father and im here for Taping a 9 year old boy ask her one of the inmates went to her and ask her why are these officials saying this about me. And he pointed the goods out whom said it to her. I want my grievance properly investigated. my Beliefs Are as is ⁽¹⁾ I want \$500 for pain an suffering ⁽²⁾ I want my inmates question to seek truth ⁽³⁾ I want those official disciplined for failure to reflect on the references of the D.C. code of conduct and policy's.

INMATE SIGNATURE: 

**Facility Manager's Appeal Response
(MAHANOY)
(301 MOREA ROAD, FRACKVILLE, PA 17932)**

This serves to acknowledge receipt of your grievance appeal to the Facility Manager for the grievance noted below. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", the following response is being provided based on a review of the entire record of this grievance. The review included your initial grievance, the Grievance Officer's response, your appeal to me and any other documents submitted.

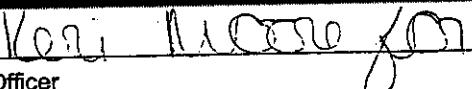
Inmate Name:	Troy Daniels	Inmate Number:	LD-8312
Facility:	Mahanoy	Unit Location:	HD 5
Grievance #:	653664		
Publication (if applicable):			
Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Dismiss/Dismiss Untimely		
<p><i>It is the decision of this Facility Manager to uphold the initial response, uphold the inmate or dismiss. This response will include a brief rationale, summarizing the conclusion, any action taken to resolve the issue(s) raised in the grievance and your appeal and relief sought.</i></p>			
Response:	<p>Frivolous</p> <p>I am in receipt of your grievance appeal in which you state your same argument regarding officers walking onto the DTU and stating information about your father raping you and that you raped a 9-year-old boy. You filed this appeal because you don't think Lt. Wall did a thorough investigation. You elaborate on this alleged incident and, basically, want another investigation into this matter. You state Lt. Wall lied and did not interview Inmate Gray, MP-8461, about your complaint. I will remind you that appeals exist to examine procedure if you, the grievant, identify errors in the way your grievance was processed and responded to. It is not to have your complaints heard a second time, re-investigated, or to rebut the response received.</p> <p>I find Lt. Wall's initial response to your grievance to be thorough and explained well. He interviewed the relevant parties. He relayed the findings of his investigation in clear terms to you. He deemed your grievance frivolous because your allegation was meritless.</p> <p>I uphold the Grievance Officer's response and deny your appeal as well as any monetary relief or free cable TV you are seeking.</p>		
Signature:			
Title:	Facility Manager		
Date:	1/5/17		

cc: Facility Grievance Coordinator
DC-15
DSFM/DSCS
Grievance Officer

2017

Final Appeal Decision
Secretary's Office of Inmate Grievances & Appeals
Pennsylvania Department of Corrections
1920 Technology Parkway
Mechanicsburg, PA 17050

This serves to acknowledge receipt of your appeal to the Secretary's Office of Inmate Grievances and Appeals for the grievance noted below. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", the following response is being provided based on a review of the entire record of this grievance. The review included your initial grievance, the Grievance Officer's response, your appeal to the Facility Manager, the Facility Manager's response, the issues you raised to final review, and (when applicable) any revised institutional responses required as a result of a subsequent remand action by this office. As necessary, input from appropriate Central Office Bureaus (e.g., Health Care Services, Chief Counsel, Office of Special Investigations and Intelligence, etc) may have been solicited in making a determination in response to your issue as well.

Inmate Name:	Troy Daniels	Inmate Number:	LD-8312		
SCI Filed at:	Mahanoy	Current SCI:	Mahanoy		
Grievance #:	653664				
Publication (if applicable):					
<table border="1"> <tr> <td>Decision:</td> <td> <input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Uphold in part/Deny in part </td> </tr> </table>				Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Uphold in part/Deny in part
Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Uphold in part/Deny in part				
<p><i>It is the decision of the Secretary's Office of Inmate Grievances and Appeals to uphold the initial response, uphold the inmate, or Uphold in part/Deny in part. This response will include a brief rationale, summarizing the conclusion, any action taken to resolve the issue(s) raised in the grievance and your appeal and relief sought.</i></p>					
Response:	<input type="checkbox"/> Frivolous				
<p>This office is in receipt of your appeal and has reviewed all applicable documents. In your grievance, you claim that on 11/15/16, various staff came on the DTU and Officer Valentine announced to everyone on the DTU your history of being victimized and your offense(s) that includes victimizing a young boy. You allege that this was retaliation, a violation of your rights, and a violation of the code of ethics for which you seek staff disciplinary action, additional staff training, free cable, and monetary relief.</p> <p>A review of the records reflects that the initial reviewing officer investigated your claims and found them to be without merit. Staff were questioned and deny your allegations. It is noted that you take issue with the investigation; however, these methods are not dictated by the inmate nor the grievance process. There is no apparent rights or code of ethics violations and you provide no evidence to suggest that retaliation exists for any reason. Your appeal and any requested relief is denied.</p>					
Signature:	Dorina Vamer 				
Title:	Chief Grievance Officer				
Date:	1/31/17				

DLV/MEB

cc: DC-15/Superintendent DelBalso
Grievance Office

Declaration
(18.Pa.C.S. § 4904)

I Ryan L Miller #^{*}MC0268 swear that the information scribe herein is the truth. On or about 3-8-17. I was getting escorted to the H-B pod excercise yard by CO[†] GEE and CO[†] Greenewers. CO[†] Greenewers asked me if I really wanted to go back to the DTU on H-D pod. I stated yeah why. He said because you got all them kiddie teachers over there. I asked him who he was talking about. He said I'm not going to put any names out there. Thats when CO[†] GEE stated T will I hate that pussy daniels. Talking about Inmate Troy Daniels # LD-8312. I asked CO[†] GEE what he did. He stated. That bitch molested 3 little girls, 3 in counting. I didn't stated any thing after that.

I Ryan L Miller #^{*}MC0268 am willing to testify on this concern/matter if needed. I Ryan L Miller #^{*}MC0268 know under the penalties of perjury (18 Pa. C.S. § 4904) under False testimony that I'm subjected to the laws of perjury.

Submitted Truthfully

Ryan L Miller #^{*}MC0268

Ryan L Miller #^{*}MC0268

cc: file

ac: T.D.

file:

EXHIBIT, DDC-804
Part 1COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONSFOR OFFICIAL USE
655-71
GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR <u>Mrs. Amy Hinman</u>	FACILITY: <u>MAHANAY</u>	DATE: <u>11-18-16</u>
FROM: (INMATE NAME & NUMBER) <u>Tray Daniels LID-8312</u>	SIGNATURE OF INMATE: <u>Tray</u>	
WORK ASSIGNMENT: <u>N/A</u>	HOUSING ASSIGNMENT: <u>HD 16 cell</u>	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any action you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages (one DC-804 form and one one-sided 8 1/2" x 11" page). State all relief that you are seeking.

On 11-15-16 from 3:30 to ~~4:30~~ 4:20 2 to 40 you will observe official you are come on the (1st) in ~~to~~ come up the steps to HD-16 water main were i am bound in turn off my water. Then a little time latter you will observe my you are bound out cleaning, but when he got to my cell on the top tier HD-16 cell he stops at my door looks at me then tells me you are bound. Beent you ~~are~~ if then it will shoe in camera bring over my tray on my side when he to cell 14 or 13 cell is they do not have one. So From after lunch you will see on camera that i have not eaten anything nor drank any water except for the water that was in my toilet. I think that it was all bad tank. Per Disc (DC-ADM 804) from section 1 and 2) there will be no more than 14 hours between the evening ~~meal~~ and breakfast but as you can see on camera 20 hours past to far i was unable to eat again. In it further state in ADM 804, that the department will not use food as a disciplinary measure. But yet these Disc regulations was developed by the State Disc official without it to ~~be~~ hired by ~~any~~ Service. All of these agres are retaliating against me to the point i sometimes try thinking of killing myself. Then around 9:00 to 9:20 you will see official you are come on the block and finally cut my water back because i am sick of this place help me me. My Reliefs ARE ~~is~~ to want it put on file that i face retaliation as retaliatory conduct for writing this report. 2) I ~~was~~ for ~~now~~ in suffering. 3) I want this guard disciplined for failure to collect on the services at the work site and regulation.

B. List actions taken and staff you have contacted, before submitting this grievance.

Reported to Sgt Skie working this night.
You can see him on my door

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Mrs. Hinman
Signature of Facility Grievance Coordinator

11/29/16
Date

WHITE Facility Grievance Coordinator Copy CANARY File Copy PINK Action Return Copy
GOLDEN ROD Inmate Copy

7-4 CC
7-20-18
- 4) I want this official to seek training for
three month

5) I want the cameras took at date in times herein
then rescored for a latter date as needed for court.

6) I want Free Cable for a year.

I want it notified Per D.O.C code of
Ethics; All employees are promptly to report
to their supervisor any information which comes
to their attention that indicates violation of the
Law, Rules, an or regulation of the D.O.C by an
inmate or employee. In they are to maintain
the ~~the~~ familiarity on provisions of such directive.

But yet you will see on camera within the time frame mention
herein this report Sgt Zulalstic working this stiffholder guy with web
tacts on his elbow come to my door in i ~~feel~~ tell him what's happening
but nothing was done to oppose this matter.

IF My Beliefs ARE MET no further

Action's will be taken by me.

(P.S.)

Hope to hear from

you soon with A

Response herein

Respectfully, Fully yours

PO 5 LD 8318

Troy John Daniels Jackson

INITIAL REVIEW RESPONSE

SCI Mahanoy

301 Mores Rd

Frackville, PA 17932

This serves to acknowledge receipt of your grievance to the assigned Grievance Officer. The response is as follows:

Inmate Name:	Daniels, Troy	Inmate Number:	LD8312
Facility:	SCI MAH	Unit Location:	HD 20
Grievance #:	653671	Grievance Date:	11/18/16
Publication (if applicable):			
<input type="checkbox"/> Uphold Inmate <input checked="" type="checkbox"/> Grievance Denied <input type="checkbox"/> Uphold in part/Denied in part			

Decision:

Uphold Inmate
 Grievance Denied
 Uphold in part/Denied in part

It is the decision of this grievance officer to uphold, deny or uphold in part/deny in part the inmate's initial grievance. This response will include a brief rationale, summarize the conclusion, any action taken to resolve the issue(s) raised in the grievance and, relief sought.

Response:

I have reviewed your grievance dated 11/18/16, wherein you indicate Officer Young turned off your water and that you did not eat.

I have spoken to Officer Young and he has stated to me that he turned your water off due to you throwing unknown liquid under your door. It was also stated that you told Officer Young that as soon as he opens the wicket you are going to take it hostage. I have also talked to Sgt. Guzinski and he stated that he did not talk to you that day. Officer Young also turned your water back on during his shift. You received a DC-141 that day for having a Controlled substance of psych medication that did not belong to you.

Based on the above information, I consider this grievance to be frivolous as it lacks merit and has no basis in fact. It was due to your assaultive behavior that caused your water to be turned off, Mr. Daniels. You fail to mention that in your version of what occurred. jr

Signature:	R. Williams
Title:	Lt.
Date:	12/16/2016

cc: Superintendent
 Facility Grievance Coordinator
 DC-15
 File

SCI INMATE APPEAL TO FACILITY MANAGER GRIEVANCE				DEC 30 2017 RECEIVED SOLVATION
Number	NAME	HOUSING UNIT	DATE	GRIEVANCE #
317	Demels Troy	HD-S-Cell	12-25-16	653671
I ed my initial response from the Grievance Office/Coordinator on 12-17-17 re the following appeal issues:				
Refer to DC ADM 804, Grievance Appeal Procedures, for complete instructions.				
<p>Please provide a BRIEF (no longer than two pages) appeal statement.</p> <p>My water was turned off for throwing unknown liquid under my bed. Why was I not written up for this violation of the department? Because it was a lie. I was burnt for tray and not given water. Most of the problems I was known with the C to 2 Shift officials. Official Young wanted to play a part in their negligents. And even did say I was going to hold the water hostage in which never he was still suppose to give me my food or not use it as a threat as indicated in this initial grievance response. Just because I suppose to have said that in which I did not. Per DC ADM 410 as it states; The department will not take food as a disciplinary measure. So to cut off my water and to not feed me violates my access in it was all court on camera. And this Lt. R. Williams trying to justify this official Mr. Young violation of the code of conduct policy. Then this Mr. Williams says I was write up for having a controlled substance with medication that was not mine. This has nothing to do with my water in that misconduct was drop. Then Mr. Williams finds my grievance about him in he can said Mr. Young turned off my water and did not give me dinner that night so what's for him about it? my beliefs also as I went to prison for priors offense I want the cameras looked at time indicated in my initial grievance I want this good disciplined for failure to let on the references of the Doc conduct and policy.</p>				

INMATE SIGNATURE: T. S.

**Facility Manager's Appeal Response
(MAHANOY)
(301 MOREA ROAD, FRACKVILLE, PA 17932)**

This serves to acknowledge receipt of your grievance appeal to the Facility Manager for the grievance noted below. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", the following response is being provided based on a review of the entire record of this grievance. The review included your initial grievance, the Grievance Officer's response, your appeal to me and any other documents submitted.

Inmate Name:	Troy Daniels	Inmate Number:	LD-8312
Facility:	Mahanoy	Unit Location:	HD 5
Grievance #:	653671	<i>[Handwritten Signature]</i>	
Publication (if applicable):			
Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Dismiss/Dismiss Untimely <input type="checkbox"/> Uphold in part/Deny in part		
<p><i>It is the decision of this Facility Manager to uphold the initial response, uphold the inmate or dismiss. This response will include a brief rationale, summarizing the conclusion, any action taken to resolve the issue(s) raised in the grievance and your appeal and relief sought.</i></p>			
Response:	<input type="checkbox"/> Frivolous		
<p>I am in receipt of your grievance appeal in which you state your same argument as in your initial complaint. You argue points of Lt. Williams' response. Appeals exist to examine procedure if you, the grievant, identify errors in the way your grievance was processed and responded to. It is not to have your complaints heard a second time or to rebut the response received.</p>			
<p>Lt. Williams provided you with a clear response to his investigation into your complaint. Your own actions caused your water to be turned off and you were not truthful about your other complaints. I urge you to follow the rules and regulations of the DTU.</p>			
<p>I uphold the Grievance Officer's response and deny your appeal as well as any monetary relief you are seeking.</p>			
Signature:	<i>[Handwritten Signature]</i>		
Title:	Facility Manager		
Date:	1/5/17		

cc: Facility Grievance Coordinator
DC-15
DSFM/DSCS
Grievance Officer
file

2017

Final Appeal Decision
Secretary's Office of Inmate Grievances & Appeals
 Pennsylvania Department of Corrections
 1920 Technology Parkway
 Mechanicsburg, PA 17050

This serves to acknowledge receipt of your appeal to the Secretary's Office of Inmate Grievances and Appeals for the grievance noted below. In accordance with the provisions of DC-ADM 804, "Inmate Grievance System Policy", the following response is being provided based on a review of the entire record of this grievance. The review included your initial grievance, the Grievance Officer's response, your appeal to the Facility Manager, the Facility Manager's response, the issues you raised to final review, and (when applicable) any revised institutional responses required as a result of a subsequent remand action by this office. As necessary, input from appropriate Central Office Bureaus (e.g., Health Care Services, Chief Counsel, Office of Special Investigations and Intelligence, etc) may have been solicited in making a determination in response to your issue as well.

Inmate Name:	Troy Daniels	Inmate Number:	LD-8312
SCI Filed at:	Mahanoy	Current SCI:	Mahanoy
Grievance #:	653671		
Publication (if applicable): 			
Decision:	<input checked="" type="checkbox"/> Uphold Response (UR) <input type="checkbox"/> Uphold Inmate (UI) <input type="checkbox"/> Uphold in part/Deny in part		
<i>It is the decision of the Secretary's Office of Inmate Grievances and Appeals to uphold the initial response, uphold the inmate, or Uphold in part/Deny in part. This response will include a brief rationale, summarizing the conclusion, any action taken to resolve the issue(s) raised in the grievance and your appeal and relief sought.</i>			
Response:	<i>Frivolous</i>		
<p>This office is in receipt of your appeal and has reviewed all applicable documents. In your grievance, you claim that on 11/15/16, Officer Young turned off your water for a period of time and also failed to feed you. You claim that you reported this to the Sergeant. A review of the records reflects that you were flooding the tier and staff were forced to shut the water off for a period of time. Further, the records show that you threatened to take your wicket hostage as soon as it was opened. Your actions as well as your verbal threats resulted in staff having to react accordingly. Staff are under no obligation to place their personal safety at jeopardy when an inmate has clearly exhibited or verbalized his/her intentions as was done here. There is no apparent rights or code of ethics violations. You provide no evidence to suggest that retaliation exists for any reason. Your appeal and any requested relief is denied.</p>			
Signature:	<i>Keri Mamer</i>		
Title:	Chief Grievance Officer		
Date:	1/30/17		

DLV/MEB

cc: DC-15/Superintendent DelBalso
Grievance Office

These are all lies
 That's why i ask
 For the camera video
 to be save.

EXHIBIT, EDeclaration

I Ryan E Miller #MC0268 swear that the information
scribe herein is the truth. On Jan 2nd, 2017 I was in the
shower next to I'm Troy Daniels #LD-8312 and he showed me
that he cut his wrists and neck and chest with his razor.
I asked him why he do that. He told me because all of the
pain he is going through. Because all the gavards keep calling him
a rapist and is telling everyone on the block that he got
raped by his dad Derrick Jackson. I told him man I know
just try to talk it out with the psych.

I Ryan E Miller #MC0268 am willing to testify on this
concern/matter if needed. I ~~am~~ Ryan E Miller #MC0268 know
under the Penalties of Perjury (18.P.C.5.84904) under false
testimony that I'm subjected to the laws of perjury.

Submitted Truthfully
Ryan E Miller # MC0268
Ryan E Miller # MC0268

cc:file

Smart communication/PA,DOC
Troy Daniels LD-8312

(SCI) Huntington
P.O. Box 33028
St. Petersburg, FL 33733

U.S. District
middle District of
William J. McAlon
& U.S.

235 N. Wash
Scranton, PA